

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: Reliable Biopharmaceutical
St. Louis, MO 63114

EPA ID NO: M O D 9 8 5 8 0 5 0 9 2



**U.S. ENVIRONMENTAL
PROTECTION AGENCY**

1999 Hazardous Waste Report

**FORM
IC**

**IDENTIFICATION AND
CERTIFICATION**

Instructions: Please see the detailed instructions beginning on page 7 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each section is provided below.

Sec. I Site name and location address. Check the box ☐ in items A, B, C, E, F, G, and H if same as label; if different, enter corrections. If label is absent, enter information. Instructions page 7.

A. EPA ID No.
Same as label ☐ or → M O D 9 8 5 8 0 5 0 9 2

B. County
Same as label ☐ or → St. Louis

C. Site/company name Reliable Biopharmaceutical
Same as label ☐ or →

D. Has the site name associated with this EPA ID changed since 1997?
☐ 1 Yes ☒ 2 No

E. Street name and number. If not applicable, enter industrial park, building name, or other physical location description.
Same as label ☐ or → 1945 Walton Rd.

F. City, town, village
Same as label ☐ or → Overland

G. State
Same as label ☐ or → M O

H. Zip Code
Same as label ☐ or → 6 3 1 1 4 - 0 1 9 2

Sec. II Mailing address of site. Instructions page 7.

A. Is the mailing address the same as the location address? ☐ 1 Yes (SKIP TO SEC. III) ☒ 2 No (CONTINUE TO BOX B)

B. Number and street name of mailing address
P.O. Box 140192

C. City, town, village
St. Louis

D. State
M O

E. Zip Code
6 3 1 1 4 - 0 1 9 2

Sec. III Name, title, and telephone number of the person who should be contacted if questions arise regarding this report. Instructions page 7.

A. Last Name First name M.I.
Murphy James G.

B. Title
Environmental Services

C. Telephone Number
3 1 4 4 2 9 - 7 7 0 1 0
Extension 1 3 9

Sec. IV "I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties under Section 3008 of the Resource Conservation and Recovery Act for submitting false information, including the possibility of fine and imprisonment for knowing violations." Instructions page 8.

A. Last Name First name M.I.
Murphy James G.

B. Title
Environmental Services

C. Signature
James G. Murphy

D. Date of signature
0 2 2 1 0 0
Month Day Year

RECEIVED

BORIS data entered

BY Smith TR-COR

ON 10/27/00

QC'd & B 10/31/00

FEB 24 2000

HAZARDOUS WASTE PROGRAM
MO DEPARTMENT OF
NATURAL RESOURCES

Page 1 of 2

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: Reliable Biopharmaceutical
St. Louis, MO 63114EPA ID NO: MO D 1985 181015 101912U.S. ENVIRONMENTAL
PROTECTION AGENCY

1999 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I A. Waste description (page 12) *Ignitable spent solvent from organic reactions/purification; mixture of hexane, pyridine, ethyl acetate, methylene chloride, and methanol, with a small amount of dissolved organic solids/aqueous salts.*

B. EPA hazardous waste code (page 12) D 0 0 1 D 0 3 8
F 0 0 2 F 0 0 3 F 0 0 5

C. State hazardous waste code (page 13)

D. SIC code (page 13)

2 8 9 9

E. Origin code (page 13)

1

System Type

M

F. Source code (page 14)

A 4 9

G. Point of measurement (p. 14)

4

H. Form code (page 14)

B 2 0 4

I. RCRA-radioactive mixed (page 14)

2

Sec. II A. Quantity generated in 1999 (page 15)

1 1 2 2 0 . 0

B. UOM (page 15)

5

Density

0 . 9 7☐ 1 lbs/gal ☒ 2 sg

C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15)

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
☒ 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM

On-site process system type (page 16)

M

Quantity treated, disposed, or recycled on site in 1999 (page 16)

1 1 2 2 0 . 0

ON-SITE PROCESS SYSTEM 2

On-site process system type (page 16)

M

Quantity treated, disposed, or recycled on site in 1999 (page 16)

1 1 2 2 0 . 0

Sec. III A. Was any of this waste shipped off site in 1999 for treatment, disposal, or recycling? (page 17)
☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site 1 B. EPA ID No. of facility waste was shipped to (page 17)

MO D 1985 181015 101912

C. System type shipped to (p. 17)

M 0 6 1

D. Off-site availability code (page 17)

1

E. Total quantity shipped in 1999 (page 17)

5 3 3 5 . 0

Site 2 B. EPA ID No. of facility waste was shipped to (page 17)

MO D 1985 181015 101912

C. System type shipped to (p. 17)

M 0 6 1

D. Off-site availability code (page 17)

1

E. Total quantity shipped in 1999 (page 17)

5 8 8 5 . 0

Site 3 B. EPA ID No. of facility waste was shipped to (page 17)

MO D 1985 181015 101912

C. System type shipped to (p. 17)

M

D. Off-site availability code (page 17)

1

E. Total quantity shipped in 1999 (page 17)

1 1 2 2 0 . 0

Comments: *I.F. Solvents are used as a manufacturing aid for the recrystallization, chromatography, and precipitation for high purity finished goods.*
II.B. Average specific gravity.

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St. Louis, MO 63114EPA ID NO: M O D 9 8 5 8 0 5 0 9 2U.S. ENVIRONMENTAL
PROTECTION AGENCY

1999 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I A. Waste description (page 12) *Ignitable spent methanol and ethanol containing a small amount of water and dissolved biochemicals.*B. EPA hazardous waste code (page 12) D 0 0 1 C. State hazardous waste code (page 13) D. SIC code (page 13) 2 8 9 9E. Origin code (page 13) 1
System Type M F. Source code (page 14) A 3 2G. Point of measurement (p. 14) 3H. Form code (page 14) B 2 0 3I. RCRA-radioactive mixed (page 14) 2Sec. II A. Quantity generated in 1999 (page 15) 5 6 6 5 . 0B. UOM (page 15) 5
Density 1 1 0
☐ 1 lbs/gal ☒ 2 sgC. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15)
☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
☒ 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM

On-site process system type (page 16) M Quantity treated, disposed, or recycled on site in 1999 (page 16)

ON-SITE PROCESS SYSTEM 2

On-site process system type (page 16) M Quantity treated, disposed, or recycled on site in 1999 (page 16) Sec. III A. Was any of this waste shipped off site in 1999 for treatment, disposal, or recycling? (page 17)
☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>M O D</u> <u>9</u> <u>8</u> <u>1</u> <u>1</u> <u>2</u> <u>3</u> <u>3</u> <u>9</u> <u>1</u>	C. System type shipped to (p. 17) <u>M</u> <u>0</u> <u>6</u> <u>1</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1999 (page 17) <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u>3</u> <u>1</u> <u>6</u> <u>1</u> <u>3</u> <u>1</u> <u>0</u> <u>.</u> <u>0</u>
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) <u>M O D</u> <u>9</u> <u>8</u> <u>0</u> <u>6</u> <u>3</u> <u>2</u> <u>9</u> <u>5</u> <u>4</u>	C. System type shipped to (p. 17) <u>M</u> <u>0</u> <u>6</u> <u>1</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1999 (page 17) <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u>2</u> <u>0</u> <u>3</u> <u>5</u> <u>.</u> <u>0</u>
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u>	C. System type shipped to (p. 17) <u>M</u> <u> </u> <u> </u> <u> </u>	D. Off-site availability code (page 17) <u> </u>	E. Total quantity shipped in 1999 (page 17) <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u>

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: Reliable Biopharmaceutical Corp.
St. Louis, MO 63114EPA ID NO: MOD 91815 18105 01912U.S. ENVIRONMENTAL
PROTECTION AGENCY

1999 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I	A. Waste description (page 12) <i>Ignitable spent solid used in the purification of organic compounds; largely silica gel, with absorbed solvents ethyl acetate, hexane, or methylene chloride.</i>				
B. EPA hazardous waste code (page 12) <u>D 0 0 1</u> <u>F 0 0 2</u> <u>F 0 0 3</u>		C. State hazardous waste code (page 13) _____			
D. SIC code (page 13) <u>2 8 1 9 1 9</u>	E. Origin code (page 13) System Type <u>1</u> <u>M</u>	F. Source code (page 14) <u>A 4 9</u>	G. Point of measurement (p. 14) <u>4</u>	H. Form code (page 14) <u>B 3 1 9</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>

Sec. II	A. Quantity generated in 1999 (page 15) <u>2 2 5 0 . 0</u>	B. UOM (page 15) <u>1</u> Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)
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ON-SITE PROCESS SYSTEM		ON-SITE PROCESS SYSTEM 2	
On-site process system type (page 16) <u>M</u>	Quantity treated, disposed, or recycled on site in 1999 (page 16) _____	On-site process system type (page 16) <u>M</u>	Quantity treated, disposed, or recycled on site in 1999 (page 16) _____

Sec. III	A. Was any of this waste shipped off site in 1999 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)			
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Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>MOD 91811 1123 391</u>	C. System type shipped to (p. 17) <u>M 0 4 3</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1999 (page 17) <u>9 0 0 . 0</u>
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) <u>MOD 91806 32 954</u>	C. System type shipped to (p. 17) <u>M 0 4 3</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1999 (page 17) <u>1 3 5 0 . 0</u>
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _____	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17) _____	E. Total quantity shipped in 1999 (page 17) _____

Comments: *I.F. Resins are used to chromatographically purify organic compounds to increase the purity of finished goods.**I.H. Largely silica gel, contaminated with some ethyl acetate.*

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St. Louis, MO 63114

EPA ID NO: M 0 D 1 9 8 5 8 0 5 0 9 2



**U.S. ENVIRONMENTAL
PROTECTION AGENCY**

1999 Hazardous Waste Report

**FORM
GM**

**WASTE GENERATION
AND MANAGEMENT**

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I A. Waste description (page 12) Largely aqueous waste containing toxic components such as barium, lead, and silver, and some organics.

B. EPA hazardous waste code (page 12) D 0 0 5 D 0 0 8
D 0 1 1

C. State hazardous waste code (page 13)

D. SIC code (page 13)
2 8 9 9

E. Origin code (page 13) 1
System Type
M

F. Source code (page 14)
A 9 4

G. Point of measurement (p. 14)
4

H. Form code (page 14)
B 1 0 2

I. RCRA-radioactive mixed (page 14)
2

Sec. II A. Quantity generated in 1999 (page 15)
_____ 3 7 . 0

B. UOM (page 15) 5
Density
1 . 0 0
☐ 1 lbs/gal ☒ 2 sg

C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15)
☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
☒ 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM

On-site process system type (page 16) M _____
Quantity treated, disposed, or recycled on site in 1999 (page 16)

ON-SITE PROCESS SYSTEM 2

On-site process system type (page 16) M _____
Quantity treated, disposed, or recycled on site in 1999 (page 16)

Sec. III A. Was any of this waste shipped off site in 1999 for treatment, disposal, or recycling? (page 17)
☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17)	D. Off-site availability code (page 17)	E. Total quantity shipped in 1999 (page 17)
Site 1	<u>M 0 D 1 9 8 0 6 3 2 9 5 4</u>	<u>M 0 4 1 1</u>	<u>1</u>	_____ <u>3 7</u> . <u>0</u>
Site 2	_____	<u>M</u>	<u>1</u>	_____
Site 3	_____	<u>M</u>	<u>1</u>	_____

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: Reliable Biopharmaceutical Corp.
St. Louis, MO 63114

EPA ID NO: M10D 9815 805 092



**U.S. ENVIRONMENTAL
PROTECTION AGENCY**

1999 Hazardous Waste Report

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**WASTE GENERATION
AND MANAGEMENT**

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I	A. Waste description (page 12) <u>Zinc Dust.</u>				
B. EPA hazardous waste code (page 12) <u>D003</u>		C. State hazardous waste code (page 13)			
D. SIC code (page 13) <u>281919</u>	E. Origin code (page 13) System Type <u>1</u> <u>M</u>	F. Source code (page 14) <u>A99</u>	G. Point of measurement (p. 14) <u>1</u>	H. Form code (page 14) <u>B316</u>	I. RCRA-radioactive mixed (page 14) <u>2</u>
Sec. II	A. Quantity generated in 1999 (page 15) <u>5.0</u>		B. UOM (page 15) <u>5</u> Density <u>20</u> <input type="checkbox"/> 1 lbs/gal <input checked="" type="checkbox"/> 2 sg		C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)
ON-SITE PROCESS SYSTEM 1			ON-SITE PROCESS SYSTEM 2		
On-site process system type (page 16) <u>M</u>		Quantity treated, disposed, or recycled on site in 1999 (page 16)		On-site process system type (page 16) <u>M</u>	

Sec. III	A. Was any of this waste shipped off site in 1999 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)			
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) <u>M10D</u> <u>9811</u> <u>123</u> <u>391</u>	C. System type shipped to (p. 17) <u>M</u> <u>043</u>	D. Off-site availability code (page 17) <u>1</u>	E. Total quantity shipped in 1999 (page 17) <u>5.0</u>
Site 2	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17)	E. Total quantity shipped in 1999 (page 17)
Site 3	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17) <u>M</u>	D. Off-site availability code (page 17)	E. Total quantity shipped in 1999 (page 17)

Comments: I.F. Unused raw material.

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SITE NAME: Reliable Biopharmaceutical Corp.
St. Louis, MO 63114

EPA ID NO: M O D | 9 | 8 | 5 | 8 | 0 | 5 | 0 | 9 | 2



**U.S. ENVIRONMENTAL
PROTECTION AGENCY**

1999 Hazardous Waste Report

FORM
GM

WASTE GENERATION AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

Sec. I	A. Waste description (page 12) <i>Toxic liquid containing small amount of mercuric iodide.</i>
--------	--

B. EPA hazardous.waste code (page 12)		C. State hazardous waste code (page 13)	
D. SIC code (page 13)		E. Origin code (page 13) System Type	
F. Source code (page 14)		G. Point of measurement (p. 14)	
H. Form code (page 14)		I. RCRA-radioactive mixed (page 14)	

Sec. II	A. Quantity generated in 1999 (page 15)	B. UOM 15 (page 15) Density 1 . 00 <input type="checkbox"/> 1 lbs/gal <input checked="" type="checkbox"/> 2 sg	C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15)
	<div style="text-align: right;">1 0</div>		<input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM		ON-SITE PROCESS SYSTEM 2	
On-site process system type (page 16)	Quantity treated, disposed, or recycled on site in 1999 (page 16)	On-site process system type (page 16)	Quantity treated, disposed, or recycled on site in 1999 (page 16)
[M] [] [] [] []	[] [] [] [] [] [] [] [] [] [] . []	[M] [] [] []	[] [] [] [] [] [] [] [] [] [] . []

Sec. III	A. Was any of this waste shipped off site in 1999 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)			
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) M O D 9 8 0 6 3 2 9 5 4	C. System type shipped to (p. 17) M 0 7 9	D. Off-site availability code (page 17) 1	E. Total quantity shipped in 1999 (page 17) _ _ _ _ _ _ _ _ . _
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) _ _ _ _ _ _ _ _ _ _ _ _ _ _	C. System type shipped to (p. 17) M _ _ _ _	D. Off-site availability code (page 17) _	E. Total quantity shipped in 1999 (page 17) _ _ _ _ _ _ _ _ _ _ _ _ _ _ . _
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) _ _ _ _ _ _ _ _ _ _ _ _ _ _	C. System type shipped to (p. 17) M _ _ _ _	D. Off-site availability code (page 17) _	E. Total quantity shipped in 1999 (page 17) _ _ _ _ _ _ _ _ _ _ _ _ _ _ . _

Comments: I.H. Mostly aqueous, with some mercuric iodide.
III.C. Wastewater treatment.